

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	932	07-09-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	2-6-03
2	✓	✓	1-7-03
3	✓	✓	1-7-03
4	✓	✓	1-7-03
5	✓	✓	1-7-03
6	✓	✓	1-7-03
7	✓	✓	1-7-03
8	✓	✓	1-7-03
9	✓	✓	1-7-03
10	✓	✓	1-7-03
11	✓	✓	1-7-03
12	✓	✓	1-7-03
13	✓	✓	1-7-03
14	✓	✓	1-7-03
15	✓	✓	1-7-03
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30	✓	✓	1-7-03
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47	✓	✓	1-7-03
48	✓	✓	1-7-03
49	✓	✓	1-7-03
50	✓	✓	1-7-03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

07-09-01